Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

 □ Declaration Submitted OR With Initial Filing

□ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Num	ber 81230.62US4	
First Named Inventor	Patrick H. Hayes	
CC	MPLETE IF KNOWN	
Application Number	1	
Filing Date	concurrent herewith	
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: A HAND HELD DEVICE HAVING A BROWSER APPLICATION the specification of which (Title of the Invention) is attached hereto was filed on (MM/DD/YYYY) as United States Application Number or PCT International and was amended on (MM/DD/YYYY) (if applicable). Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1 56 I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? **Prior Foreign Application** Foreign Filing Date **Priority** Number(s) Country (MM/DD/YYYY) Country Not Claimed YES П ☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. ApplicationNumber(s) Filing Date (MM/DD/YYYY) 60/264,767 01/29/2001 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 4]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between

the filing date of the prior application and the national of PC1 international filing date of this application.												
U.S. Parent Application or PCT Parent Number						Filing Date D/YYYY)		Parent Patent Number (if applicable)				
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.												
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the												
Patent and Tradem therewith			☑ Custom OR	mer Number		25541			>		Customer	
				ered practition	ner(s) n	name/registr	ation nun	nber listea	below T	ABer	distration	
N/	lame			Number			Nan	ne		251	10mber	
								DEMARK OFFICE				
☐Additional registe	ered prac	ctitioner(s) nam	ed on suppl	lemental Reç	gistered	Practitioner	r Informat	tion sheet	PTO/SB/	02C attach	ed hereto.	
Direct all corresp	ondenc		Customer Nu or Bar Code			25541		OR	☐ Corr	respondance	e address below	
Name												
Address												
Address												
City						State	T		ZIP	i		
Country			Telepho	one					Fax			
I hereby declare the believed to be true; punishable by fine of application or any p	e; and furth or impriso	ther that these s sonment, or both	statements v	were made w	vith the I	knowledge t	that willful	ıl false state	tements a	and the like	so made are	
Name of Sole of	or First	Inventor:				☐ A petiti	ion has	been filed	J for this	s unsigned	inventor	
Given	Name ((first and midd	<u>lle [if any]</u>)			Fam	nily Name	or Surr	name		
		Patrick H.	\bigcirc		\top		,	Hay				
Inventor's Signature		F	Uni	1 10	1.	Klee	iy ,		ı	Date	7/1/01	
Residence: City	Mission Viejo State			ca CA		Country	USA		Citi	zenship	U.S.	
Post Office Add	et Office Address 22981 Arija											
Post Office Add	iress											
City	Missio n Viejo State CA ZIP 92691 Country USA											
Additional inve	entors ar	e being named	1 on the 2 s	eunnlements	HibbA Is	ional Invent	tor(s) shr	aat(e) PTC	7/SB/02/	hadsette A	harata	

Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of 4

Name of Additional Jo	A petition has been filed for this unsigned inventor											
Given Name (first and middle lif anyl)												
Given Name (first and middle [if any])			Family Name or Sumame									
Steve LanPing				Huang								
Inventor's Signature	Samo -							Date			07/02/01	
Residence: City	Placentia	CA Country USA					Cit	Citizenship U.S.				
Post Office Address	113 S. Washington St.											
Post Office Address												
City	Placentia	State	CA	ZIP	928	870		Country	, U	SA		
Name of Additional Jo	oint inventor, if any:				A petition	on ha	as been filed	for this u	nsigne	ed inv	entor	
Given Name (first and middle [if any])				Family Name or Surname								
Weidong William		Wang	Vang									
Inventor's Signature	W	<u>e</u>	-gl	N					Date		7-5-01	
Residence: City	Tustin	State	Cou	Country USA			Cit	Citizenship U.S.		U.S.		
Post Office Address	2381 Apple Tree Driv	re										
Post Office Address												
City	Tustin St	ate	CA	Zip	927	780		Country	, U	SA		
Name of Additional Joint Inventor, if any:					☐ A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname								
Han-Sheng Yuh												
Inventor's Signature	Ma	2	,				Date		07/05/2001			
Residence: City	Walnut	State	CA	Cou	ıntry	U	SA	Citiz	enshi	ip	Chinese	
Post Office Address	20006 Esquiline Avenue											
Post Office Address												
City	Walnut	State	CA		Zip	,	91789	Countr	y l	USA		

Burden Hour Statement This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 4 of <u>4</u>

Name of Additional Joint Inventor, if any:				☐ A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])				Family Name or Surname								
Jonathan Christian				Lim								
Inventor's Signature	Jona	Lin					Date		7-5-01			
Residence: City	Cypress	State	CA	Country				Citize	nship	U.S.		
Post Office Address	11281 Angada St.											
Post Office Address												
City	Cypress	State	CA	ZIP 90630 Co				untry				
Name of Additional Jo	pint Inventor, if any	r:			A petiti	on has been file	ed for th	nis unsi	gned inv	entor		
Given Na	me (first and middle	e [if any])		Family Name or Surname								
Joyce M.				Presseau								
Inventor's Signature	Total					1	Tuly2,01					
Residence: City	Laguna each	State	State CA Country USA					Citize	nship	US.		
Post Office Address	31591 Santa Rosa	a Drive		RE 181 1								
Post Office Address												
City	Laguna Beach	State	CA	Zip	92	651	Cou	ntry	USA			
Name of Additional Joint Inventor, if any:					☐ A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname								
Inventor's Signature							te					
Residence: City		State			Country				Citizenship			
Post Office Address									•			
Post Office Address												
City		State			Zip		Cot	untry				

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.